

FORM PTO-1083

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PATENT
Attorney Docket No. 83394.0008
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hiromichi Yamada, et al.

Serial No: 10/611,315

Confirmation No.: 4002

Filed: June 30, 2003

For: MICRO CONTROLLER FOR DECOMPRESSING
AND COMPRESSING VARIABLE LENGTH CODES
VIA A COMPRESSED CODE DICTIONARY (As
Amended)

Art Unit: 2183

Examiner: George D. Zalepa

I hereby certify that this correspondence
is being transmitted via facsimile to
(571) 273-8300;
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
May 18, 2006
Date of Deposit
Firoozeh Vakilzadeh
Name
Signature Date 5/18/06

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☒ No additional fee is required
☒ Petition for Extension of Time in duplicate is enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	8	20	0 0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	1	3	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)			\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claim: 1				TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

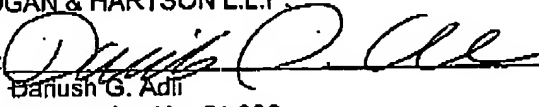
- ☐ Please charge our Deposit Account No. 50-1314 in the amount of \$_____ to cover the extra claims fee. A copy of this sheet is enclosed.
- ☒ Please charge the fee of \$120 to cover the one month extension fee to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

HOGAN & HARTSON L.L.P.

By:



Dariush G. Adli

Registration No. 51,386

Attorneys for Applicants

Date: May 18, 2006

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MAY 18 2006

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IMPORTANT NOTICE
TELECOPY/FACSIMILE COVER LETTERTO: U.S. Patent and Trademark Office
Examiner: George D. Zalepa
Art Unit: 2183DATE: May 18, 2006FROM: Darius G. Adli

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 18

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MESSAGE:

Patent Application No.: 10/611,315; Our Ref. 83394.0008

I hereby certify that the following documents:

- ☒ Amendment Transmittal Letter
☒ Amendment
☒ Petition for Extension of Time (with one month fee)

are being facsimiled to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450., for filing in the above-identified application.

May 18, 2006
Date of Deposit
Firoozeh VakilzadehTELE COPY/FAX NUMBER: (571) 273-8300 ART UNIT 2183CLIENT NUMBER: 83394.0008ATTORNEY BILLING NUMBER: 5214CONFIRMATION NUMBER: Please return fax to Rosa Vakilzadeh

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☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

HOGAN & HARTSON L.L.P.

By: 

Darluis G. Adli

Registration No. 51,385

Attorneys for Applicants

Date: May 18, 2006

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